

Division of Health Care Finance and Policy

Fiscal Year 1999

**Outpatient Hospital
Observation Database
Documentation Manual**

June 2000

Division of Health Care Finance and Policy
Two Boylston Street
Boston, Massachusetts 02116-4704

<http://www.mass.gov/dhcfp>

General Documentation
FY1999 Outpatient Hospital Observation Database

Table of Contents

| | <u>Page</u> |
|--|-------------|
| I. Introduction | 1 |
| II. Compact Disk (CD) File Specification | 2 |
| III. Data Standards | 3 |
| A. Definition of Quarterly Reporting Periods | 3 |
| B. Data Edits and Error Categories | 4 |
| C. Data Element Field Descriptions and Error Categories | 5 |
| D. Outpatient Observation Data Codes | 9 |
| E. Description of Data Levels I – VI | 13 |
| IV. Data Verification Process | 14 |
| A. Profile Report Distribution Tables | 14 |
| B. Profile Report Error Categories | 15 |
| C. Summary of Hospitals' FY99 Profile Report Responses | 16 |
| D. Reported Profile Report Discrepancies by Category | 23 |
| E. Index of Hospitals Reporting Data Discrepancies | 25 |
| F. Individual Hospital Discrepancy Documentation | 26 |
| V. Cautionary Use Data | 36 |
| A. Hospitals with Cautionary and Missing Data for FY99 | 37 |

General Documentation
FY1999 Outpatient Hospital Observation Database

Table of Contents

| | <u>Page</u> |
|---|-------------|
| VI. Calculated Fields | 38 |
| A. Age Calculation | 38 |
| B. Observation Sequence Number Calculation | 39 |
| C. No. Days Between Observation Stays Calculation | 40 |
| VII. Appendices | 41 |
| A. .DBF File Structure | 42 |
| B. .MDB File Structure | 44 |
| C. .TXT File Structure | 46 |
| D. Outpatient Observation Data Levels I – VI | 48 |
| E. Hospital Addresses & DPH ID Numbers | 52 |

General Documentation
FY1999 Outpatient Hospital Observation Database

I. Introduction

The Massachusetts Division of Health Care Finance and Policy began collecting Outpatient Observation Data in July 1997. The Division's collection of Outpatient Observation Data was in response to increasing migration of hospital care to the outpatient observation setting from the traditional inpatient setting. Outpatient Observation patients are observed, evaluated, and treated, if necessary, before they are safely discharged from the hospital.

The Outpatient Observation Data includes patients who receive outpatient observation services and are not admitted to the hospital. Outpatient Observation services is defined generally for reporting purposes in the Case Mix Regulation 114.1 CMR 17.02 as:

Observation services are those furnished on a hospital's premises which are reasonable and necessary to further evaluate the patient's condition and provide treatment to determine the need for possible admission to the hospital. These services include the use of a bed and periodic monitoring by a hospital's physician, nursing, and other staff.

This manual includes information to be used with the Outpatient Observation case mix data as specified in 114.1 CMR 17.08, Outpatient Observation Data Specifications. Information contained in this manual includes the data file specifications, standards the Division is using for checking the data, hospital verification responses concerning hospital reported data, and file structure descriptions. Also included is information on cautionary use data and calculated fields.

Regulations:

Copies of **Regulation 114.1 CMR 17.00: Requirement for the Submission of Hospital Case Mix and Charge Data** and **Regulation 114.1 CMR 2.00: Disclosure of Hospital Case Mix and Charge Data** may be obtained for a fee by faxing a request to the Division at (617) 727-7662. The Regulations also may be found at the Division's web site: <http://www.mass.gov/dhcfp>.

II. Compact Disk (CD) File Specification

1) Data Formats:

The Division has created the outpatient observation data set in three available formats:

- .DBF
- .MDB
- .TXT

2) File / Table Names:

OA99L#Q1
OA99L#Q2
OA99L#Q3
OA99L#Q4

Where '#' stands for the level of data requested.

3) 1999 Outpatient Observation Record Counts:

For Hospital Year 1999 the number of outpatient observation stays collected from Massachusetts hospitals for Quarters 1 – 4 totaled 153,820. The distribution by quarter is as follows:

| | |
|-----------|--------|
| Quarter 1 | 37,417 |
| Quarter 2 | 38,537 |
| Quarter 3 | 39,053 |
| Quarter 4 | 38,813 |

4) Data Formats:

For a complete listing of database structure formats (.DBF, .MDB, and .TXT), please refer to the Appendices at the back of this manual.

III. Data Standards

Definition of Quarterly Reporting Periods

All Massachusetts acute care hospitals are required to file data that describes the case mix of their patients as well as the charges for services provided to their patients in accordance with Regulation 114.1 CMR 17.00. Hospitals report data to the Division on a quarterly basis. For the 1999 period, these quarterly reporting intervals were as follows:

Quarter 1: October 1, 1998 – December 31, 1998

Quarter 2: January 1, 1999 – March 31, 1999

Quarter 3: April 1, 1999 – June 30, 1999

Quarter 4: July 1, 1999 – September 30, 1999

III. Data Standards

Data Edits and Error Categories

Fiscal Year 1999 outpatient observation data was submitted by the hospitals 75 days after the close of each quarter. The required data elements were then edited using the corresponding edits as specified in ***Regulation 114.1 CMR 17.08: Outpatient Observation Data Specifications***.

The quarterly data is edited for compliance with regulatory requirements using a one percent error rate as specified in Regulation 114.1 CMR 17.08. The one percent error rate is based on the presence of type A and type B errors as follows:

Type A: One error per outpatient observation stays causes rejection of discharge.

Type B: Two errors per outpatient observation stay causes rejection of discharge.

If **one percent or more** of the discharges are rejected, then the entire data submission is rejected by the Division, and the hospital is informed that the submission failed the edit process. These edits primarily check for valid codes, correct formatting, and the presence of required data elements. Please see listing of data elements categorized by error type, which follows this section.

Each hospital receives a quarterly error report displaying invalid outpatient observation stay information. Quarterly data which does not meet the one percent compliance standard must be resubmitted by the individual hospital until the standard is met.

The Division strives to include data that has passed the one percent compliance standard in the data files we release to the public. When this is not possible, we include data which did not meet the 1% standard (i.e. failed the edits). Submissions which have failed are referred to as **Cautionary Submissions**. Observation stays within submissions that have failed the edit process are assigned a special flag, which indicates that the submission failed.

Please see the Cautionary Use Data section for further technical details.

III. Data Standards

Data Element Field Descriptions and Error Categories

The following are the required data elements that hospitals must report to the Division in accordance with the Case Mix Regulation 114.1 CMR 17.00. We have also included additional fields created by the Division. Each recipient of the outpatient observation data has been granted approval by the Division to receive a certain level of data. Please refer to Section III for a description of Data Levels I – VI, and to Section VII to review the specific data elements contained in your data files. Please note that higher levels contain an increasing number of Deniable Data Elements.

In addition to the field names, the data description and error category for each field is listed below:

| Field Name: | Short Description: | Error Category: |
|--------------------|---|------------------------|
| Hos_ID | Hospital DPH number | A |
| MultiSiteN | Hospital's designated number for multiple sites merged under one DPH number | |
| Pt_ID | Unique Health Identification Number | A |
| MR_N | Patient's Medical Record number | A |
| Acct_N | Hospital billing number for the patient | A |
| DOB | Patient's date of birth | A |
| Sex | Patient's sex | A |
| Race | Patient's race | B |
| Zip_Code | Patient's zip code | B |
| Beg_Date | Patient's beginning service date | A |
| End_Date | Patient's ending service date | A |
| Obs_Time | Initial encounter time of day | B |
| Ser_Unit | Unit of Service is hours | A |
| Obs_Type | Patient's type of visit status | B |

General Documentation
FY1999 Outpatient Hospital Observation Database

III. Data Standards

Data Element Field Descriptions and Error Categories

| Field Name: | Short Description: | Error Category: |
|--------------------|--|------------------------|
| Obs_1Srce | Originating, referring, or transferring source for Observation Visit | B |
| Obs_2Srce | Secondary referring or transferring source for Observation visit | B |
| Dep_Stat | Patient's departure status | A |
| Payr_Pri | Patient's primary source of payment | A |
| Payr_Sec | Patient's secondary payment source | A |
| Charges | Total charges for observation rounded up to the nearest dollar | A |
| Surgeon | Patient's surgeon for this visit: Unique Physician Number (UPN), or "DENSG", "PODTR" or "OTHER" or "MIDWIF" | B |
| Att_MD | Patient's attending physician: Unique physician Number (UPN), or "DENSG", "PODTR" or "OTHER" or "MIDWIF" | B |
| Oth_Care | Other caregiver | B |
| PDX | Patient's principal diagnosis: Valid ICD-9-CM code | A |
| Assoc_DX1 | Patient's first associated diagnosis: Valid ICD-9-CM code | A |
| Assoc_DX2 | Patient's second associated diagnosis: Valid ICD-9-CM code | A |
| Assoc_DX3 | Patient's third associated diagnosis: Valid ICD-9-CM code | A |
| Assoc_DX4 | Patient's fourth associated diagnosis: Valid ICD-9-CM code | A |
| Assoc_DX5 | Patient's fifth associated diagnosis: Valid ICD-9-CM code | A |
| P_PRO | Patient's Principal Procedure: Valid ICD-9-CM code | A |

General Documentation
FY1999 Outpatient Hospital Observation Database

III. Data Standards

Data Element Field Descriptions and Error Categories

| Field Name: | Short Description: | Error Category: |
|--------------------|---|------------------------|
| P_PRODATE | Date of patient's Principal Procedure | B |
| Assoc_PRO1 | Patient's first associated procedure: Valid ICD-9-CM code | A |
| Assoc_DATE1 | Date of patient's first associated procedure | B |
| Assoc_PRO2 | Patient's second associated procedure: Valid ICD-9-CM code | A |
| Assoc_DATE2 | Date of patient's second associated Procedure | B |
| Assoc_PRO3 | Patient's third associated procedure: Valid ICD-9-CM code | A |
| Assoc_DATE3 | Date of patient's third associated procedure | B |
| CPT1 | Patient's first CPT code | A |
| CPT2 | Patient's second CPT code | A |
| CPT3 | Patient's third CPT code | A |
| CPT4 | Patient's fourth CPT code | A |
| CPT5 | Patient's fifth CPT code | A |

Additional Fields Created by the Division:

| | | |
|------------------|--|----|
| MonthofBeg_Date | Month of Begin Date | NA |
| YearofBeg_Date | Year of Begin Date | NA |
| MonthofEnd_Date | Month of End Date | NA |
| YearofEnd_Date | Year of End Date | NA |
| AgeOfPatient | Patient Age | NA |
| AgeUnits | Term Patient Age is Based On | NA |
| ObsSeq_Num | Observation Sequence Number | NA |
| NoofDaysBtwObs | Number of Days Between Observation Stays | NA |
| SubmissionPassed | Submission Passed Edits Flag | NA |

General Documentation
FY1999 Outpatient Hospital Observation Database

Notes:

- 1) ICD-9-CM Code = International Classification of Diseases, 9th Revision, Clinical Modification
- 2) CPT = Physician's Current Procedural Terminology Codes

III. Data Standards

Outpatient Observation Data Codes

The following are the data codes for the required data elements that hospitals must report to the Division in accordance with Case Mix Regulation 114.1 CMR 17.00. We have also included data codes for the additional fields created by the Division. Each recipient for outpatient observation data has been granted approval by the Division to receive a certain level of data. Please refer to Section III for a description of Data Levels I – VI and to Section VII to review the specific data elements contained in your data files. Please note that the higher levels contain an increasing number of Deniable Data Elements.

| Field Name | Description |
|-------------|---|
| Hos_ID | Hospital Department of Public Health number |
| Multi_SiteN | Optional field for a hospital's determined number used to distinguish multiple sites that fall under one DPH number |
| Pt_ID | Unique Health Identification Number (UHIN) |
| MR_N | Patient's hospital medical record number |
| Acct_N | Hospital's billing number for the patient |
| DOB | Birth month, day, and year |
| Sex | 1 = male; 2 = female; 3 = unknown |
| Race | 1 = White; 2 = Black; 3=Asian; 4 = Hispanic; 5 = Native American; 6 = Other; 9 = Unknown |
| Zip_Code | Patient's residential 5-digit zip code |
| Beg_Date | Month, day, and year when service begins |
| End_Date | Month, day, and year when service ends |
| Obs_Time | Initial Observation encounter time. The time the patient became an Observation Stay patient. |
| Ser_Unit | The amount of time the patient has spent as an Observation Stay patient. The unit of service for Observation Stay is hours. |
| Obs_Type | Observation Visit Status: 1 = Emergency, 2 = Urgent, 3 = Elective, 4 = Newborn, 5 = Information Not Available |

General Documentation
FY1999 Outpatient Hospital Observation Database

III. Data Standards

Outpatient Observation Data Codes

| Field Description | Description |
|-------------------|--|
| Obs_1Srce | <p>Originating Observation Visit Source:</p> <p>1 = Direct Physician Referral, 2 = Within Hospital Clinic Referral 3 = Direct Health Plan Referral, 4 = Transfer from Acute Care Hospital, 5 = Transfer from SNF, 6 = Transfer from ICF, 7 = Outside Hospital ER Transfer, 8 = Court/Law Enforcement, 9 = Other, 0 = Information Not Available, L = Outside Hospital Clinic Referral, M = Walk-In/Self- Referral, R = Inside Hospital ER Transfer, T = Transfer from another Institution's SDS, W = Extramural Birth, Y = Within Hospital SDS Transfer</p> <p>Example: If a patient is transferred from a SNF to the hospital's clinic and then becomes an Observation Stay status, the Originating Observation Source would be "5 – Transfer from SNF".</p> |
| Obs_2Srce | <p>Secondary Observation Visit Source:</p> <p>1 = Direct Physician Referral, 2 = Within Hospital Clinic Referral 3 = Direct Health Plan Referral, 4 = Transfer from Acute Care Hospital, 5 = Transfer from SNF, 6 = Transfer from ICF, 7 = Outside Hospital ER Transfer, 8 = Court/Law Enforcement, 9 = Other, 0 = Information Not Available, L = Outside Hospital Clinic Referral, M = Walk-In/Self- Referral, R = Inside Hospital ER Transfer, T = Transfer from another Institution's SDS, W = Extramural Birth, Y = Within Hospital SDS Transfer</p> <p>Example: If a patient is transferred from a SNF to the hospital's clinic and then becomes an Observation Stay status, the Secondary Observation Source would be "2 – Within Hospital Clinic Transfer".</p> |
| Dep_Stat | <p>Patient Disposition (Departure Status):</p> <p>1 = Routine, 2 = Adm to Hospital, 3 = Transferred, 4 = AMA, 5 = Expired</p> |
| Payr_Pri | <p>Primary Source of Payment. Please see Appendix H for Alphabetical Source of Payment List & Appendix I for Numerical Source of Payment List</p> |
| Payr_Sec | <p>Secondary Source of Payment. Please see Appendix H for Alphabetical Source of Payment List & Appendix I for Numerical Source of Payment List</p> |
| Charges | <p>Grand total of all charges associated with the patient's observation stay.</p> |

General Documentation
FY1999 Outpatient Hospital Observation Database

III. Data Standards

Outpatient Observation Data Codes

| Field Description | Description |
|-------------------|--|
| Surgeon | Unique Physician Number (UPN), or “DENSG” = Dental Surgeon, “PODTR” = Podiatrist or “OTHER” = for situations where no permanent physician license number is assigned or if a limited license is assigned, or “MIDWF” = Midwife, Or ----- = Invalid |
| Att_MD | Unique Physician Number (UPN), or “DENSG” = Dental Surgeon, “PODTR” = Podiatrist or “OTHER” = for situations where no permanent physician license number is assigned or if a limited license is assigned, or “MIDWF” = Midwife, Or ----- = Invalid |
| Oth_Care | Other primary caregiver responsible for patient’s care: 1 = Resident, 2 = Intern, 3 = Nurse Practitioner, 4 = Not Used, 5 = Physician Assistant |
| PDX | ICD9 Principal Diagnosis excluding decimal point |
| Assoc_DX | ICD9 Associated Diagnosis, up to five associated diagnoses excluding the decimal point |
| P_PRO | Principal ICD9 Procedure excluding decimal point |
| P_PRODATE | Date of Patient’s Principal Procedure |
| Assoc_PRO | ICD9 Associated Procedures, up to three associated procedures excluding the decimal point |
| AssocDATE | Date(s) of patient’s associated procedures, up to three |
| CPT | CPT4, up to five CPT codes |

General Documentation
FY1999 Outpatient Hospital Observation Database

III. Data Standards

Outpatient Observation Data Codes

Additional Fields Created by the Division:

| Field Description | Description |
|--------------------------|---|
| MonthofBeg_Date | 1 = January, 2 = February, 3 = March, 4 = April, 5 = May, 6 = June, 7 = July, 8 = August, 9 = September, 10 = October, 11 = November, 12 = December |
| YearOfBeg_Date | 4 digit year |
| MonthOfEnd_Date | 1 = January, 2 = February, 3 = March, 4 = April, 5 = May, 6 = June, 7 = July, 8 = August, 9 = September, 10 = October, 11 = November, 12 = December |
| YearofEnd_Date | 4 digit year |
| AgeOfPatient | In years if >=1, in weeks if <1 |
| AgeUnits | Weeks or Years |
| ObsSeqNum | Observation Sequence Number |
| NoofDaysBtwObs | Number of Days Between Observation Stays |
| SubmissionPassed | -1 = Passed, 0 = Failed |

III. Data Standards

Description of Data Levels I - VI

Six Fiscal Year 1999 data levels have been created to correspond to the levels in ***Regulation 114.5 CMR 2.00; "Disclosure of Hospital Case Mix and Charge Data"***. Higher levels contain an increasing number of the data elements defined as "Deniable Data Elements" in Regulation 114.5 CMR 2.00. The deniable data elements include: the Unique Health Identification Number (UHIN - which is the encrypted patient social security number), the patient medical record number, hospital billing number, Medicaid claim certificate number (Medicaid Recipient ID number), date of birth, beginning and ending dates of service, the Unique Physician Number (UPN - which is the encrypted Massachusetts Board of Registration in Medicine License Number), and procedure dates.

The six levels include:

- | | |
|------------------|--|
| LEVEL I | Contains all case mix data elements, except the deniable data elements. |
| LEVEL II | Contains all Level I data elements, plus the UPN. |
| LEVEL III | Contains all Level I data elements, plus the UHIN, an observation sequence number for each UHIN observation record, and may include the number of days between each subsequent observation stay for each UHIN number. |
| LEVEL IV | Contains all Level I data elements, plus the UPN, the UHIN, an observation sequence number for each UHIN observation record, and may include the number of days between each subsequent observation stay for each UHIN number. |
| LEVEL V | Contains all Level IV data elements, plus the patient's beginning service date, and ending service date and procedure dates. |
| LEVEL VI | Contains all of the deniable data elements, except the patient identifier component of the Medicaid recipient ID. |

IV. Data Verification Process

The year-end Outpatient Observation Data verification process is intended to present the hospitals with a profile of their individual data as retained by the Division. The purpose of this project is to function as a quality control measure for hospitals to review the data they have provided to the Division of Health Care Finance and Policy.

Hospitals have an opportunity to review their data each year. The Division produces a Profile Report for the hospital to review that contains a series of frequency distribution tables covering selected data elements. Examples of these tables include number of observation patients by month, average hours of service, charge summary, and the top diagnoses and procedures. A complete listing of all tables is shown below.

Profile Report Distribution Tables

| | |
|--|--|
| • Observation Patient by Month | • Patient Sex Distribution |
| • Average Hours of Service | • Patient Race Distribution |
| • Charge Summary | • Top 10 Zip Codes of Patient Origin |
| • Observation Type Distribution | • Top 10 Primary Diagnoses, Average Charge, and Average Hours of Service |
| • Originating Referral / Transferring Source | • Top 10 Principal Procedures |
| • Secondary Referral / Transferring Source | • Top 10 Primary Payors |
| • Other Primary Caregivers | • Top 10 Secondary Payors |
| • Departure Status Summary | • Top 10 CPT Codes |
| • Patient Age Distribution | |

IV. Data Verification Process

After reviewing each Profile Report, hospitals are asked to file a response form that provides the Division with verification that the report has been reviewed. The **Profile Report Response Form** provides each hospital with two alternatives for their reply:

Hospital Agrees (also known as an “A” response): By checking this category, a hospital indicates its agreement that the data appearing on the Profile Report is accurate and that it represents the hospital’s outpatient observation patient profile.

Hospital Discrepancy (s) Noted (also known as a “B” response): By checking this category, a hospital indicates that the data on the report is accurate except for discrepancies noted.

If any discrepancies exist (i.e. a “B” response), the Division requests that hospitals provide a written explanation of the discrepancies, which will be included in this Outpatient Observation Documentation manual. A listing of the Profile Report Error Categories is shown below:

Profile Report Error Categories:

The discrepancy categories that hospitals may report on the Profile Report Verification Response form are as follows:

| | | |
|---|--------------------------|------------------|
| Patients by Month | Other Primary Caregivers | Diagnoses |
| Hours of Service | Departure Status | Procedures |
| Charge Summary | Age | Primary Payors |
| Observation Type Distribution | Sex | Secondary Payors |
| Originating Referring / Transfer Source | Race | CPT Codes |
| Secondary Referring / Transfer Source | Zip Codes | |

Hospitals are strongly encouraged by the Division to review their Profile Report for inaccuracies and make necessary corrections so that subsequent quarters of data will be accurate.

General Documentation
FY1999 Outpatient Hospital Observation Database

IV. Data Verification Process

Summary of Hospitals' FY 1999 Profile Report Responses

| DPH ID | HOSPITAL NAME | 'A' | 'B' | NONE | COMMENTS |
|--------|---|-----|-----|------|-----------------------|
| 2006 | Anna Jaques Hospital | X | | | |
| 2226 | Athol Memorial Hospital | X | | | |
| 2073 | AtlantiCare Medical Center | X | | | |
| 2339 | Baystate Health Systems | X | | | |
| 2313 | Berkshire Health Systems – Berkshire Campus | | X | | Explanation Received. |
| 2231 | Berkshire Health Systems - Hillcrest | | | N/A | |
| 2069 | Beth Israel Deaconess Med. Ctr. – East & West Campus | X | | | |
| 2307 | Boston Medical Center – B.C.H./University | X | | | |
| 2060 | Boston Regional Medical Center | | | N/A | Hospital closed. |
| 2921 | Brigham & Women's | X | | | |
| 2118 | Brockton Hospital | X | | | |
| 2108 | Cambridge Health Alliance – Cambridge Hospital Campus | | | X | |
| 2001 | Cambridge Health Alliance - Somerville | | | X | |

General Documentation
FY1999 Outpatient Hospital Observation Database

IV. Data Verification Process

Summary of Hospitals' FY 1999
Profile Report Responses

| DPH ID | HOSPITAL NAME | 'A' | 'B' | NONE | COMMENTS |
|--------|---|-----|-----|------|-----------------------|
| 2135 | Cape Cod Health Systems – Cape Cod Hospital | X | | | |
| 2289 | Cape Cod Health Systems - Falmouth | X | | | |
| 2114 | Caritas Norwood Hospital | X | | | |
| 2856 | Caritas Southwood Hospital | X | | | |
| 2003 | Carney Hospital | X | | | |
| 2139 | Children's Medical Center | | | X | |
| 2126 | Clinton Hospital | X | | | |
| 2020 | Columbia MetroWest Medical Center – Framingham | | X | | Explanation Received. |
| 2039 | Columbia MetroWest Medical Center – Leonard Morse | | X | | Explanation Received. |
| 2155 | Cooley-Dickinson Hospital | X | | | |
| 2335 | Dana Farber Cancer Institute | X | | | |
| 2054 | Deaconess-Glover Memorial Hospital | X | | | |
| 2298 | Deaconess-Nashoba Community Hospital | X | | | |

General Documentation
FY1999 Outpatient Hospital Observation Database

IV. Data Verification Process

Summary of Hospitals' FY 1999 Profile Report Responses

| DPH ID | HOSPITAL NAME | 'A' | 'B' | NONE | COMMENTS |
|--------|-------------------------------------|-----|-----|------|-----------------------|
| 2067 | Deaconess-Waltham Hospital | X | | | |
| 2018 | Emerson Hospital | X | | | |
| 2052 | Fairview Hospital | | X | | Explanation received. |
| 2048 | Faulkner Hospital | | X | | Explanation received. |
| 2120 | Franklin Medical Center | X | | | |
| 2101 | Good Samaritan Medical Center | X | | | |
| 2038 | Hallmark Health – Lawrence Memorial | X | | | |
| 2041 | Hallmark Health – Malden Campus | | | N/A | |
| 2058 | Hallmark Health – Melrose Wakefield | X | | | |
| 2046 | Hallmark Health – Whidden | X | | | |
| 2143 | Harrington Memorial Hospital | | X | | Explanation Received. |
| 2131 | Haverhill Municipal Hospital (Hale) | X | | | |
| 2034 | Health Alliance Hospitals, Inc. | X | | | |

General Documentation
FY1999 Outpatient Hospital Observation Database

IV. Data Verification Process

Summary of Hospitals' FY 1999
Profile Report Responses

| DPH ID | HOSPITAL NAME | 'A' | 'B' | NONE | COMMENTS |
|--------|-----------------------------------|-----|-----|------|-----------------------|
| 2036 | Heywood Hospital | X | | | |
| 2225 | Holy Family Hospital | X | | | |
| 2145 | Holyoke Hospital | X | | | |
| 2157 | Hubbard Regional Hospital | X | | | |
| 2082 | Jordan Hospital | X | | | |
| 2033 | Lahey Clinic Hospital | X | | | |
| 2099 | Lawrence General Hospital | X | | | |
| 2040 | Lowell General Hospital | | X | | Explanation Received. |
| 2103 | Marlborough Hospital | X | | | |
| 2042 | Martha's Vineyard Hospital | X | | | |
| 2148 | Mary Lane Hospital | X | | | |
| 2167 | Massachusetts Eye & Ear Infirmary | X | | | |
| 2168 | Mass. General Hospital | X | | | |
| 2089 | Medical Center at Symmes | | | N/A | Hospital Closed. |

General Documentation
FY1999 Outpatient Hospital Observation Database

IV. Data Verification Process

Summary of Hospitals' FY 1999 Profile Report Responses

| DPH ID | HOSPITAL NAME | 'A' | 'B' | NONE | COMMENTS |
|--------|---|-----|-----|------|-----------------------|
| 2149 | Mercy Hospital | X | | | |
| 2105 | Milford-Whitinsville Hospital | X | | | |
| 2227 | Milton Hospital | | X | | Explanation Received. |
| 2022 | Morton Hospital & Medical Center | X | | | |
| 2071 | Mount Auburn Hospital | X | | | |
| 2044 | Nantucket Cottage Hospital | X | | | Explanation Received. |
| 2059 | New England Baptist Hospital | X | | | |
| 2299 | New England Medical Center | | | X | |
| 2075 | Newton-Wellesley Hospital | X | | | |
| 2076 | Noble Hospital | X | | | |
| 2061 | North Adams Regional Hospital | X | | | |
| 2016 | Northeast Health Systems – Addison Gilbert Hospital | X | | | |
| 2007 | Northeast Health Systems – Beverly Hospital | X | | | |
| 2014 | North Shore Medical Center – Salem | X | | | |

General Documentation
FY1999 Outpatient Hospital Observation Database

IV. Data Verification Process

Summary of Hospitals' FY 1999 Profile Report Responses

| DPH ID | HOSPITAL NAME | 'A' | 'B' | NONE | COMMENTS |
|--------|--|-----|-----|------|-----------------------|
| 2150 | Providence Hospital | X | | | |
| 2151 | Quincy Hospital | X | | | |
| 2063 | Saints Memorial Medical Center | | X | | Explanation Received. |
| 2337 | Southcoast Health Systems – Charlton Memorial Hospital | X | | | |
| 2010 | Southcoast Health Systems – St. Luke's | X | | | |
| 2106 | Southcoast Health Systems – Tobey | X | | | |
| 2107 | South Shore Hospital | | | X | |
| 2011 | St. Anne's Hospital | | | X | |
| 2085 | St. Elizabeth's Hospital | X | | | |
| 2128 | Saint Vincent Hospital | X | | | |
| 2100 | Sturdy Memorial Hospital | X | | | |
| 2841 | UMass. Medical Center | X | | | |
| 2077 | UMass/Memorial Health Care | X | | | |

General Documentation
FY1999 Outpatient Hospital Observation Database

IV. Data Verification Process

Summary of Hospitals' FY 1999
Profile Report Responses

| DPH ID | HOSPITAL NAME | 'A' | 'B' | NONE | COMMENTS |
|--------|---|-----|-----|------|----------|
| 2091 | Vencor – Boston | | | N/A | |
| 2171 | Vencor – North Shore | | | N/A | |
| 2094 | Winchester Hospital | X | | | |
| 2181 | Wing Memorial Hospital & Medical Center | X | | | |

IV. Data Verification Process

Reported Profile Report Discrepancies by Category

The following data discrepancies were reported by hospitals on their FY1999 Profile Report Verification Response forms:

| |
|--|
| Patients By Month |
| Hours of Service |
| Charge Summary |
| Observation Type Distribution |
| Originating / Refer. / Transfer. Source |
| Departure Status |
| Age |
| Sex |
| Race |
| Zip Codes |
| Diagnoses |
| Procedures |
| Primary Payors |
| Secondary Payors |

General Documentation
FY1999 Outpatient Hospital Observation Database

IV. Data Verification Process

FY99 Reported Profile Report Discrepancies by Category

| Hospital | Patients by Month | Hours of Service | Charge Summary | Observation Type Distribution | Originating Referring / Transferring Source | Departure Status |
|---|--------------------------|-------------------------|-----------------------|--------------------------------------|--|-------------------------|
| Berkshire Health Systems – Berkshire Med. Center Campus | X | | | | | |
| Columbia MetroWest Medical Center – Framingham Campus | | | | | X | |
| Columbia MetroWest Medical Center – Natick Campus | | | | | X | |
| Fairview Hospital | X | | | | | |
| Faulkner Hospital | X | X | X | X | X | X |
| Harrington Memorial | | | | | X | |
| Saints Memorial Medical Center | | | | | X | |

| Hospital | Age | Sex | Race | Zip Codes | Diagnoses | Procedures |
|-------------------|------------|------------|-------------|------------------|------------------|-------------------|
| Faulkner Hospital | X | X | X | X | X | X |

| Hospital | Primary Payers | Secondary Payers |
|-------------------|-----------------------|-------------------------|
| Faulkner Hospital | X | X |

IV. Data Verification Process

INDEX OF HOSPITALS REPORTING DISCREPANCIES FOR FY1999

Hospital

Page

Berkshire Medical Center - Berkshire
Columbia MetroWest – Framingham
Columbia MetroWest - Natick
Fairview Hospital
Faulkner Hospital
Harrington Memorial
Saints Memorial Medical Center

IV. Data Verification Process

INDIVIDUAL HOSPITAL DISCREPANCY DOCUMENTATION

BERKSHIRE MEDICAL CENTER – BERKSHIRE CAMPUS

Berkshire Medical Center reported discrepancies in the area of Patients by Month. The hospital reported 316 less Observation claims (a 17% variance) to the Division of Health Care Finance & Policy than the actual census. The variance was due to the fact that the missing records did not have any observation charges on them.

IV. Data Verification Process

INDIVIDUAL HOSPITAL DISCREPANCY DOCUMENTATION

COLUMBIA METROWEST - FRAMINGHAM

Columbia MetroWest – Framingham reported discrepancies in the area Originating Referring/Transferring Source. For Q1, Q2 & Q3 the numbers under code 7, “Outside Hospital ER Transfer” should have been reported under code R, “Inside Hospital ER Transfer”.

IV. Data Verification Process

INDIVIDUAL HOSPITAL DISCREPANCY DOCUMENTATION

COLUMBIA METROWEST - NATICK

Columbia MetroWest – Natick reported discrepancies in the area Originating Referring/Transferring Source. For Q1, Q2 & Q3 the numbers under code 7, “Outside Hospital ER Transfer” should have been reported under code R, “Inside Hospital ER Transfer”.

IV. Data Verification Process

INDIVIDUAL HOSPITAL DISCREPANCY DOCUMENTATION

FAIRVIEW HOSPITAL

Fairview Hospital reported discrepancies in the area of Patients by Month. The hospital reported 52 less Observation cases (a 13% variance) to the Division of Health Care Finance & Policy than the actual census. The variance was due to the fact that the missing records did not have any observation charges on them.

IV. Data Verification Process

INDIVIDUAL HOSPITAL DISCREPANCY DOCUMENTATION

FAULKNER HOSPITAL

Faulkner Hospital reported discrepancies in the areas of Patients by Month, Hours of Service, Charge Summary, Observation Type Distribution, Originating Referring / Transferring Source, Departure Status, Age, Sex, Race, Zip Codes, Diagnoses, Procedures, Primary Payers, and Secondary Payers. The corrected totals are set forth below.

Observation Patients by Month

October = 72
December = 51
Q1 Total = 162

January = 57
February = 57
March = 59
Q2 Total = 171

April = 71
May = 78
June = 82
Q3 Total = 49

July = 84
August = 83
September = 49
Q4 Total = 213

GRAND TOTAL = 782

Average Hours of Service

| Quarter | # Patients | Avg. Hours / Stay | Total Pt Hours |
|----------------|-------------------|--------------------------|-----------------------|
| 1 | 162 | 25.77 | 4179.75 |
| 2 | 171 | 24.14 | 4127.53 |
| 3 | 236 | 30.95 | 7304.40 |
| 4 | 213 | 27.00 | 5751.70 |
| Grand Total | 782 | | 21,358.38 |

General Documentation
FY1999 Outpatient Hospital Observation Database

Charge Summary

| Quarter | Avg. Charge/Stay | Total Charges |
|-------------|------------------|---------------|
| 1 | \$4,273.78 | \$692,352 |
| 2 | \$4,390.60 | \$750,793 |
| 3 | \$4,654.48 | \$1,098,458 |
| 4 | \$4,635.54 | \$985,205 |
| Grand Total | | \$3,526,808 |

Observation Type Distribution

| Quarter | Emergency | Urgent | Elective | Total |
|-------------|-----------|--------|----------|-------|
| 1 | 121 | | | 162 |
| 2 | | | 54 | 171 |
| 3 | 158 | | 76 | 236 |
| 4 | 139 | | 74 | |
| Grand Total | 535 | | 245 | 782 |

Originating Referring / Transferring Source

| Quarter | Dir Phys | In Hosp Clinic | Dir Health Plan | Outside Hosp ER | Total |
|-------------|----------|----------------|-----------------|-----------------|-------|
| 1 | 79 | | | 83 | 162 |
| 2 | 86 | | | | 171 |
| 3 | 119 | | | 115 | 236 |
| 4 | 109 | | | 106 | |
| Grand Total | 393 | | | 387 | 782 |

Secondary Referring / Transferring Source

Unable to verify at present.

Departure Status Summary

| Quarter | Routine | Adm to Hosp | Transferred | AMA | Exp | Total |
|-------------|---------|-------------|-------------|-----|-----|-------|
| 1 | 134 | 4 | 21 | | | 162 |
| 2 | 143 | 4 | 17 | | | 171 |
| 3 | 198 | 9 | 25 | | | 236 |
| 4 | | 8 | 20 | | | |
| Grand Total | 654 | 25 | 83 | 20 | | 782 |

Patient Age Distribution

| Quarter | 1-17 | 18-64 | 65 and Over | Total |
|-------------|------|-------|-------------|-------|
| 1 | 101 | | | 162 |
| 2 | | | 62 | 171 |
| 3 | | 143 | 90 | 236 |
| 4 | | 144 | 66 | |
| Grand Total | | 497 | 279 | 782 |

General Documentation
FY1999 Outpatient Hospital Observation Database

Patient Sex Distribution

| Quarter | Male | Female | Total |
|-------------|------|--------|-------|
| 1 | 64 | 98 | 162 |
| 2 | | 92 | 171 |
| 3 | 106 | 130 | 236 |
| 4 | | | |
| Grand Total | 344 | 438 | 782 |

Patient Race Distribution

| Quarter | White | Black | Asian | Hispanic | Other | Unknown | Total |
|---------|-------|-------|-------|----------|-------|---------|-------|
| 1 | 138 | | | | | | 162 |
| 2 | 156 | | | | | | 171 |
| 3 | 194 | | | | | 23 | 236 |
| 4 | | | | | | | |
| Total | 637 | | | | | 78 | 782 |

Top 10 Zip Codes of Patient Origin

| Q1 | Q2 | Q3 | Q4 |
|------------|------------|------------|------------|
| 02131 – 27 | 02132 – 30 | 02132 – 26 | 02136 – 28 |
| 02136 – 19 | 02131 – 23 | 02131 – 25 | 02132 – 27 |
| 02135 – 4 | 02136 – 18 | 02136 – 16 | 02026 – 18 |
| | 02130 – 8 | 02130 – 14 | 02062 – 13 |
| | 02127 – 5 | 02090 – 10 | 02090 – 8 |
| | | 02062 – 8 | |
| | | 02115 – 2 | |

Top 10 Primary Diagnoses, Avg Charge, Avg Hours of Service

| Diagnosis Codes | # Observations | Avg Chgs | Avg Hours Svc |
|-----------------|----------------|-----------|---------------|
| 30391 | 20 | \$483.06 | 28.00 |
| 4359 | 15 | \$3714.85 | 27.14 |

Top 10 Principal Procedures

| Procedure Code | # Observations |
|----------------|----------------|
| (ADD) 9462 | 9 |
| (EXCLUDE) 9463 | 8 |

General Documentation
FY1999 Outpatient Hospital Observation Database

Top 10 Primary Payers

| Payer Name | Q1 | Q2 | Q3 | Q4 |
|-----------------------------|-----------|-----------|-----------|-----------|
| Medicare | | 42 | | |
| Tufts Assoc. Health Plan | | | | 23 |
| Medicaid Managed Care (PCC) | | | 19 | |
| Medicare HMO | | | 19 | 19 |
| HMO Blue | 13 | | | |
| Tufts Total Health | 8 | | | |
| Blue Cross Indemnity | 10 | 14 | 20 | 19 |
| HCHP | 5 | 8 | 32 | 43 |
| Other Commercial | | | 6 | 5 |
| Total | 162 | 171 | 236 | |

Top 10 Secondary Payers

| Payer Name | Q1 | Q2 | Q3 | Q4 |
|--------------------------|-----------|-----------|-----------|-----------|
| Self-Pay | 80 | 104 | 134 | 138 |
| Medicare | | 17 | 42 | |
| BCBS Medex | | 21 | 12 | |
| Tufts Assoc Health Plan | 10 | | | 3 |
| Medicaid | 17 | | | 11 |
| Unicare | 5 | | | |
| Blue Cross Indemnity | 7 | | | 5 |
| Other Commercial | | 6 | 8 | 5 |
| United Healthcare Ins Co | | | | 3 |
| Total | 162 | 171 | 236 | |

Top 10 CPT Codes

Correct as provided.

IV. Data Verification Process

INDIVIDUAL HOSPITAL DISCREPANCY DOCUMENTATION

HARRINGTON MEMORIAL HOSPITAL

Harrington Memorial Hospital reported discrepancies in the area of Originating Referring / Transferring Source. The Division's report showed a total of 1151 patients admitted from a source of "Outside Hospital ER Transfer", while the hospital's records indicated that these patients were admitted from a source "Within Hospital ER Transfer".

IV. Data Verification Process

INDIVIDUAL HOSPITAL DISCREPANCY DOCUMENTATION

SAINTS MEMORIAL MEDICAL CENTER

Saints Memorial Medical Center reported discrepancies in the area of Originating Referring / Transferring Source. The error was in Code 7, "Outside Hospital ER Transfer" for Q1 & Q2. 266 patients in Q1 and 326 patients in Q2 should have been reported under Code R, "Inside Hospital ER Transfer". Q3 & Q4 appeared to be correct.

The numbers in the total column were therefore inaccurate. They should have appeared on this report as Code 7 – 0 and Code R – 1433, respectively.

V. Cautionary Use Data

The Outpatient Observation data files contain the most recent active data from each hospital. Active data includes submissions from hospitals that have “**passed**” the Division’s edits, and also includes submissions that have “**failed**”. Failing the edit process would mean that 1% or more of the observation stays did not pass the edit process. We consider data that did not pass the edit process to be “**cautionary use**” data.

We have included on each file a field called SubmissionPassed. This field serves as a flag and indicates whether the quarterly submission passed or failed the edit process.

- If a submission passed the edit process, the SubmissionPassed field for all observation stays within that submission are assigned a value of -1.
- If a submission failed the edit process, the SubmissionPassed field for all observation stays within that submission are assigned a value of 0.

Please see following page for specific information on hospitals with Cautionary Use data and missing data.

General Documentation
FY1999 Outpatient Hospital Observation Database

V. Cautionary Use Data

Hospitals with Cautionary and Missing Data for FY1999

The table below shows the hospitals for which the Division does not have four quarters of passed data for Hospital Year 1999. For your convenience, we have listed the status for all quarters for each hospital.

| Hospital Name | DPH ID | Q1 | Q2 | Q3 | Q4 |
|---|---------------|-----------|-----------|-----------|-----------|
| Berkshire Health Systems – Hillcrest Campus | 2231 | N/A | N/A | N/A | N/A |
| Boston Regional Medical Center | 2060 | N/A | N/A | N/A | N/A |
| Hallmark Health Care – Malden Hospital Campus | 2041 | Passed | Passed | N/A | N/A |
| Medical Center at Symmes | 2089 | Failed | N/A | N/A | N/A |
| Vencor – Boston | 2091 | N/A | N/A | N/A | N/A |
| Vencor – North Shore | 2171 | N/A | N/A | N/A | N/A |

Note: “N/A” generally means that the hospital did not have observation patients to report for a particular quarter.

VI. Calculated Fields

Age Calculation

Brief Description:

AgeOfPatient is calculated using the DateDiff Function in Access, which subtracts the date of birth (DOB) from the End_Date. Age is calculated to the nearest year (the remainder is dropped) if patient is at least 1 year old. The AgeUnits field is assigned a value of 'YEARS'. Age is calculated to the nearest week (the remainder is dropped) if a patient is less than 1 year old. The AgeUnits field is assigned a value of 'WEEKS'.

If the observation did not pass the edits for any reason the age is not calculated and the AgeOfPatient field is set to zero and the AgeUnits field is left blank.

Detailed Description:

1. If the observation passed the edits then the DateDiff function is used to determine the age in weeks of the patient by subtracting the Date of Birth from the End of Service Date.
2. If the age in weeks is greater than 51 then the DateDiff function is used to determine the age in years of the patient by subtracting the Date of Birth from the End of Service Date and the AgeUnits is set to "Years".
3. If the age in weeks is less than or equal to 51 then the DateDiff function is used to determine the age in weeks of the patient by subtracting the Date of Birth from the End of Service Date and the AgeUnits is set to "Weeks".
4. If the observation did not pass the edits then the AgeOfPatient is set to zero and the AgeUnits field is left blank.

VII. Calculated Fields

Observation Sequence Number Calculation

Brief Description:

The file is sorted by PT_ID (Unique Patient ID also known as the UHIN) and End Date. The Observation Sequence Number (ObsSeqNo) is then calculated by incrementing a counter for each of the PT_ID's observation stays.

If the observation did not pass the edits for any reason the Observation Sequence Number is not calculated and the ObsSeqNo field is set to zero.

Detailed Description:

1. The file is sorted by PT_ID (Unique Patient ID also known as the UHIN) and End_Date.
2. The sequence number is calculated by incrementing a counter from 1 to nnn, where a sequence number of 1 indicates the first observation stay for a PT_ID and nnn indicates the last observation stay for the PT_ID.
3. If the observation did not pass the edits then the ObsSeqNo is set to zero.

VII. Calculated Fields

Number of Days Between Observation Stays Calculation

Brief Description:

The file is sorted by PT_ID (Unique Patient ID also known as the UHIN) and End Date. For PT_IDs with 2 or more observation stays the Number of Days Between Observation Stays (NoofDaysBtwObs) is calculated using the DateDiff Function in Access which subtracts the previous observation end date from the current End_Date.

If the observation did not pass the edits for any reason the Number of Days Between Observation Stays is not calculated and the NoofDaysBtwObs field is set to zero.

Detailed Description:

1. The file is sorted by PT_ID (Unique Patient ID also known as the UHIN) and End_Date.
2. If this is the first occurrence of a PT_ID the Number of Days Between Observation Stays is set to zero.
3. If a second occurrence of a PT_ID is found then the Number of Days Between Observation Stays (NoofDaysBtwObs) is calculated by using the DateDiff Function in Access, which subtracts the previous observation end date from the current End_Date.
4. Step 3 is repeated for all subsequent observation stays until the PT_ID changes.
5. If the observation did not pass the edits then the NoofDaysBtwObs is set to zero.

General Documentation
FY1999 Outpatient Hospital Observation Database

VII. Appendices

Page

| | |
|-------------|---|
| Appendix A. | .DBF File Structure |
| Appendix B. | .MDB File Structure |
| Appendix C. | .TXT File Structure |
| Appendix D. | Outpatient Observation Data Levels I – VI |
| Appendix E. | Hospital Addresses and DPH ID Numbers |

General Documentation
FY1999 Outpatient Hospital Observation Database

Appendix A

Outpatient Observation .DBF File Structure

| Field Name | Type | Width |
|-------------------|------------------|-----------|
| HOS_ID | Character | 4 |
| MULTI_SITE | Character | 1 |
| PT_ID | Character | 9 |
| MR_N | Character | 10 |
| ACCT_N | Character | 17 |
| MOSS | Character | 9 |
| DOB | Character | 10 |
| SEX | Character | 1 |
| RACE | Character | 1 |
| ZIP_CODE | Character | 5 |
| BEG_DATE | Date | 8 |
| END_DATE | Date | 8 |
| OBS_TIME | Character | 4 |
| SER_UNIT | Character | 6 |
| OBS_TYPE | Character | 1 |
| OBS_1SRCE | Character | 1 |
| OBS_2SRCE | Character | 1 |
| DEP_STAT | Character | 1 |
| PAYR_PRI | Character | 4 |
| PAYR_SEC | Character | 4 |
| CHARGES | Numeric | 11 |
| SURGEON | Character | 7 |
| ATT_MD | Character | 7 |
| OTH_CARE | Character | 1 |
| PDX | Character | 5 |
| ASSOC_DX1 | Character | 5 |
| ASSOC_DX2 | Character | 5 |
| ASSOC_DX3 | Character | 5 |
| ASSOC_DX4 | Character | 5 |
| ASSOC_DX5 | Character | 5 |
| P_PRO | Character | 4 |
| P_PRODATE | Date | 8 |
| ASSOC_PRO1 | Character | 4 |
| ASSOCDATE1 | Date | 8 |
| ASSOC_PRO2 | Character | 4 |
| ASSOCDATE2 | Date | 8 |
| ASSOC_PRO3 | Character | 4 |

General Documentation
FY1999 Outpatient Hospital Observation Database

Appendix A

Outpatient Observation .DBF File Structure

| Field Name | Type | Width |
|-------------------|----------------|-------------------|
| ASSOCDATE3 | Date | 8 |
| CPT1 | Character | 5 |
| CPT2 | Character | 5 |
| CPT3 | Character | 5 |
| CPT4 | Character | 5 |
| CPT5 | Character | 5 |
| MONTHOFBEG | Numeric | 6 |
| YEAROFBEG | Numeric | 6 |
| MONTHOFEND | Numeric | 6 |
| YEAROFEND | Numeric | 6 |
| AGEOFPATIE | Numeric | 11 |
| AGEUNITS | Character | 254 |
| OBSSEQNO | Numeric | 11 |
| NOOFDAYSBT | Numeric | 11 |
| <u>SUBMISSION</u> | <u>Logical</u> | <u>1</u> |
| **Total** | | <u>537</u> |

Please note: The data fields listed in bold are considered **Deniable Data Elements**. Depending on the level of data purchased, these fields may not be present on the file.

General Documentation
FY1999 Outpatient Hospital Observation Database

Appendix B

Outpatient Observation .MDB File Structure

| Field Name | Type | Width |
|-------------------|------------------|--------------|
| Hos_ID | Text | 4 |
| Multi_SiteN | Text | 1 |
| Pt_ID | Text | 9 |
| MR_N | Text | 10 |
| Acct_N | Text | 17 |
| MOSS | Character | 9 |
| DOB | Text | 10 |
| Sex | Text | 1 |
| Race | Text | 1 |
| Zip_Code | Text | 5 |
| Beg_Date | Date/Time | 8 |
| End_Date | Date/Time | 8 |
| Obs_Time | Text | 4 |
| Ser_Unit | Text | 6 |
| Obs_Type | Text | 1 |
| Obs_1Srce | Text | 1 |
| Obs_2Srce | Text | 1 |
| Dep_Stat | Text | 1 |
| Payr_Pri | Text | 4 |
| Payr_Sec | Text | 4 |
| Charges | Number (long) | 4 |
| Surgeon | Text | 7 |
| Att_MD | Text | 7 |
| Oth_Care | Text | 1 |
| PDX | Text | 5 |
| Assoc_DX1 | Text | 5 |
| Assoc_DX2 | Text | 5 |
| Assoc_DX3 | Text | 5 |
| Assoc_DX4 | Text | 5 |
| Assoc_DX5 | Text | 5 |
| P_PRO | Text | 4 |
| P_PRODATE | Date/Time | 8 |
| Assoc_Pro1 | Text | 4 |
| AssocDate1 | Date/Time | 8 |
| Assoc_Pro2 | Text | 4 |
| AssocDate2 | Date/Time | 8 |
| Assoc_Pro3 | Text | 4 |

General Documentation
FY1999 Outpatient Hospital Observation Database

Appendix B

Outpatient Observation .MDB File Structure

| Field Name | Type | Width |
|-------------------|------------------|--------------|
| AssocDate3 | Date/Time | 8 |
| CPT1 | Text | 5 |
| CPT2 | Text | 5 |
| CPT3 | Text | 5 |
| CPT4 | Text | 5 |
| CPT5 | Text | 5 |
| MonthofBeg_Date | Number (Integer) | 2 |
| YearofBeg_Date | Number (Integer) | 2 |
| MonthofEnd_Date | Number (Integer) | 2 |
| YearofEnd_Date | Number (Integer) | 2 |
| AgeOfPatient | Number (Integer) | 4 |
| AgeUnits | Text | 255 |
| ObsSeqNo | Number (Long) | 4 |
| NoofDaysBtwObsSBT | Number (Long) | 4 |
| SubmissionPassed | Yes/No | 1 |

Please note: The data fields listed in bold are considered **Deniable Data Elements**. Depending on the level of data purchased, these fields may not be present on the file.

General Documentation
FY1999 Outpatient Hospital Observation Database

Appendix C

Outpatient Observation .TXT File Structure

| Field Name |
|-------------------|
| Hos_ID |
| Multi_SiteN |
| Pt_ID |
| MR_N |
| Acct_N |
| MOSS |
| DOB |
| Sex |
| Race |
| Zip_Code |
| Beg_Date |
| End_Date |
| Obs_Time |
| Ser_Unit |
| Obs_Type |
| Obs_1Srce |
| Obs_2Srce |
| Dep_Stat |
| Payr_Pri |
| Payr_Sec |
| Charges |
| Surgeon |
| Att_MD |
| Oth_Care |
| PDX |
| Assoc_DX1 |
| Assoc_DX2 |
| Assoc_DX3 |
| Assoc_DX4 |
| Assoc_DX5 |
| P_PRO |
| P_PRODATE |
| Assoc_Pro1 |
| AssocDate1 |
| Assoc_Pro2 |
| AssocDate2 |
| Assoc_Pro3 |

General Documentation
FY1999 Outpatient Hospital Observation Database

Appendix C

Outpatient Observation .TXT File Structure

| Field Name |
|-------------------|
| AssocDate3 |
| CPT1 |
| CPT2 |
| CPT3 |
| CPT4 |
| CPT5 |
| MonthofBeg_Date |
| YearofBeg_Date |
| MonthofEnd_Date |
| YearofEnd_Date |
| AgeOfPatient |
| AgeUnits |
| ObsSeqNo |
| NoofDaysBtwObsSBT |
| SubmissionPassed |

Please note: The data fields listed in bold are considered **Deniable Data Elements**. Depending on the level of data purchased, these fields may not be present on the file.

General Documentation
FY1999 Outpatient Hospital Observation Database

Appendix D
Outpatient Observation Data Levels I – VI

| Field Name | Field Description | Deniable Data Elements | Level I | Level II | Level III | Level IV | Level V | Level IV |
|-----------------|---|------------------------|---------|----------|-----------|----------|----------|----------|
| Hos_ID | Hospital DPH Number | | X | X | X | X | X | X |
| Multi_SiteN | Hosp's Designated Multiple Site # | | X | X | X | X | X | X |
| Pt_ID | Unique Health Identification Number (UHIN) | D | | | D | D | D | D |
| MR_N | Patient's Medical Record Number | D | | | | | | D |
| Acct_N | Hospital Billing Number | D | | | | | | D |
| MOSS | Mother's UHIN | D | | | D | D | D | D |
| DOB | Date of Birth | D | | | | | | D |
| Sex | Sex | | X | X | X | X | X | X |
| Race | Race | | X | X | X | X | X | X |
| Zip_Code | Zip Code | | X | X | X | X | X | X |
| Beg_Date | Patient's Beginning Service Date | D | | | | | D | D |
| End_Date | Patient's Ending Service Date | D | | | | | D | D |
| Obs_Time | Initial Encounter Time of Day | | X | X | X | X | X | X |

General Documentation
FY1999 Outpatient Hospital Observation Database

Appendix D
Outpatient Observation Data Levels I – VI

| Field Name | Field Description | Deniable Data Elements | Level I | Level II | Level III | Level IV | Level V | Level IV |
|----------------|--|------------------------|---------|----------|-----------|----------|----------|----------|
| Ser_Unit | Unit of Service in Hours (= Length of Stay) | | X | X | X | X | X | X |
| Obs_Type | Type of Visit Status | | X | X | X | X | X | X |
| Obs_1Srce | Originating Referring or Transferring Source | | X | X | X | X | X | X |
| Obs_2Srce | Secondary Referring or Transferring Source | | X | X | X | X | X | X |
| Dep_Stat | Departure Status | | X | X | X | X | X | X |
| Payr_Pri | Primary Source of Payment | | X | X | X | X | X | X |
| Payr_Sec | Secondary Source of Payment | | X | X | X | X | X | X |
| Charges | Charges | | X | X | X | X | X | X |
| Surgeon | Surgeon for this Visit (will be UPN) | D | | D | | D | D | D |
| Att_MD | Attending Physician (will be UPN) | D | | D | | D | D | D |
| Oth_Care | Other Caregiver | | X | X | X | X | X | X |
| PDX | Principle Diagnosis | | X | X | X | X | X | X |
| Assoc_DX1 | Patient's First Associated Diagnosis | | X | X | X | X | X | X |
| Assoc_DX2 | Patient's Second Associated Diagnosis | | X | X | X | X | X | X |
| Assoc_DX3 | Patient's Third Associated Diagnosis | | X | X | X | X | X | X |

General Documentation
FY1999 Outpatient Hospital Observation Database

Appendix D
Outpatient Observation Data Levels I – VI

| Field Name | Field Description | Deniable Data Elements | Level I | Level II | Level III | Level IV | Level V | Level IV |
|-------------------|--|------------------------|---------|----------|-----------|----------|---------|----------|
| Assoc_DX4 | Patient's Fourth Associated Diagnosis | | X | X | X | X | X | X |
| Assoc_DX5 | Patient's Fifth Associated Diagnosis | | X | X | X | X | X | X |
| P_PRO | Principle Procedure | | X | X | X | X | X | X |
| P_PRODATE | Date of Principle Procedure | D | | | | | D | D |
| Assoc_Pro1 | First Associated Procedure | | X | X | X | X | X | X |
| AssocDate1 | Date of First Associated Procedure | D | | | | | D | D |
| Assoc_Pro2 | Second Associated Procedure | | X | X | X | X | X | X |
| AssocDate2 | Date of Second Associated Procedure | D | | | | | D | D |
| Assoc_Pro3 | Third Associated Procedure | | X | X | X | X | X | X |
| AssocDate3 | Date of Third Associated Procedure | D | | | | | D | D |
| CPT1 | First CPT Code | | X | X | X | X | X | X |
| CPT2 | Second CPT Code | | X | X | X | X | X | X |
| CPT3 | Third CPT Code | | X | X | X | X | X | X |
| CPT4 | Fourth CPT Code | | X | X | X | X | X | X |
| CPT5 | Fifth CPT Code | | X | X | X | X | X | X |

General Documentation
FY1999 Outpatient Hospital Observation Database

Appendix D
Outpatient Observation Data Levels I – VI

| Field Name | Field Description | Deniable Data Elements | Level I | Level II | Level III | Level IV | Level V | Level IV |
|------------------|---|------------------------|---------|----------|-----------|----------|---------|----------|
| MonthofBeg_Date | Month of Begin Date | | X | X | X | X | X | X |
| YearofBeg_Date | Year of Begin Date | | X | X | X | X | X | X |
| MonthofEnd_Date | Month of End Date | | X | X | X | X | X | X |
| YearofEnd_Date | Year of End Date | | X | X | X | X | X | X |
| AgeOfPatient | Patient Age | | X | X | X | X | X | X |
| AgeUnits | Term Patient Age is Based On | | X | X | X | X | X | X |
| ObsSeqNo | Observation Sequence number ordering each consecutive UHIN observation record | | | | X | X | X | X |
| NoofDaysBtwObs | Number of days between each subsequent observation stay for that UHIN number | | | | X | X | X | X |
| SubmissionPassed | Submission Passed Edits Flag | | X | X | X | X | X | X |

General Documentation
FY1999 Outpatient Hospital Observation Database

Appendix E

Hospital Addresses

| | |
|---|---|
| Anna Jaques Hospital 25 Highland Avenue Newburyport, MA 01950 DPH ID #: 2006 | Athol Memorial Hospital 2033 Main Street Athol, MA 01331 DPH ID #:2226 |
| AtlantiCare Medical Center 500 Lynnfield Street Lynn, MA 01904-1424 DPH ID #: 2073 | Baystate Health Systems 3601 Main Street Springfield, MA 01107-1116 DPH ID #: 2339 |
| Berkshire Health Systems Berkshire Medical Center Campus 725 North Street Pittsfield, MA 01201 DPH ID #: 2313 | Berkshire Health Systems – Hillcrest Hospital Campus 165 Tor Court Road Pittsfield, MA 01201 DPH ID #: 2231 |
| Beth Israel Deaconess Medical Center East & West Campus 330 Brookline Avenue Boston, MA 02215 DPH ID #: 2069 | Boston Medical Center 88 East Newton Street Boston, MA 02118 DPH ID #: 2307 |
| Boston Regional Medical Center 5 Woodland Road Stoneham, MA 02180 DPH ID #:2060 | Brigham & Women's Hospital 75 Francis Street Boston, MA 02115 DPH ID #: 2921 |
| Brockton Hospital 680 Centre Street Brockton, MA 02402 DPH ID #: 2118 | Cambridge Health Alliance Cambridge Hospital Campus 65 Beacon Street Somerville, MA 02143 DPH ID #: 2108 |
| Cambridge Health Alliance Somerville Campus 65 Beacon Street Somerville, MA 02143 DPH ID #: 2001 | Cape Cod Health Systems Cape Cod Hospital 27 Park Street Hyannis, MA 02601 DPH ID #: 2135 |
| Cape Cod Health Systems Falmouth Hospital 100 Ter Heun Drive Falmouth, MA 02540 DPH ID #: 2289 | Caritas Norwood Hospital 800 Washington Street Norwood, MA 02062 DPH ID #*: 2114 |

General Documentation
FY1999 Outpatient Hospital Observation Database

Appendix E

Hospital Addresses

| | |
|---|---|
| Caritas Southwood Hospital 111 Dedham Street Norfolk, MA 02056 DPH ID #: 2856 | Carney Hospital 2100 Dorchester Avenue Dorchester, MA 02124 DPH ID #: 2003 |
| Children's Medical Center 300 Longwood Avenue Boston, MA 02115 DPH ID #: 2139 | Clinton Hospital 201 Highland Street Clinton, MA 01510 DPH ID #: 2126 |
| Columbia MetroWest Medical Center Framingham Hospital Campus 115 Lincoln Street Framingham, MA 01701 DPH ID #: 2020 | Columbia MetroWest Medical Center Natick Campus 67 Union Street Natick, MA 01760 DPH ID #: 2039 |
| Cooley Dickinson Hospital 30 Locust Street Northampton, MA 01060-5001 DPH ID #: 2155 | Dana Farber Cancer Institute 44 Binney Street Boston, MA 02115 DPH ID #: 2335 |
| Deaconess Glover Memorial Hospital 148 Chestnut Street Needham, MA 02192 DPH ID #: 2054 | Deaconess Nashoba Hospital 200 Groton Road Ayer, MA 01432 DPH ID #: 2298 |
| Deaconess Waltham Hospital Hope Avenue Waltham, MA 02254 DPH ID #: 2067 | Emerson Hospital Route 2 Concord, NH 01742 DPH ID #: 2018 |
| Fairview Hospital 29 Lewis Avenue Great Barrington, MA 01230 DPH ID #: 2052 | Faulkner Hospital 1153 Centre Street Jamaica Plain, MA 02130 DPH ID #: 2048 |
| Franklin Medical Center 164 High Street Greenfield, MA 01301 DPH ID #: 2120 | Good Samaritan Medical Center 235 North Pearl Street Brockton, MA 02401 DPH ID #: 2101 |
| Hallmark Health Care – Lawrence Memorial Campus 170 Governors Avenue Medford, MA 02155 DPH ID #: 2038 | Hallmark Health Care – Malden Hospital Campus 100 Hospital Road Malden, MA 02148 DPH ID #: 2041 |

General Documentation
FY1999 Outpatient Hospital Observation Database

Appendix E

Hospital Addresses

| | |
|--|--|
| Hallmark Health Care – Melrose-Wakefield Hospital Campus 585 Lebanon Street Melrose, MA 02176 DPH ID #: 2058 | Hallmark Health Care – Whidden Memorial Hospital Campus 103 Garland Street Everett, MA 02149 DPH ID #: 2046 |
| Harrington Memorial Hospital 100 South Street Southbridge, MA 01550 DPH ID #: 2143 | Haverhill Municipal Hospital 140 Lincoln Avenue Haverhill, MA 01830-6798 DPH ID #: 2131 |
| Health Alliance Hospital, Inc. Leominster & Burbank Campuses 60 Hospital Road Leominster, MA 01453-8004 DPH ID #: 2034 | Heywood Hospital 242 Green Street Gardner, MA 01440 DPH ID #: 2036 |
| Holy Family Hospital 70 East Street Methuen, MA 01844 DPH ID #: 2225 | Holyoke Hospital 575 Beech Street Holyoke, MA 01040 DPH ID #: 2145 |
| Hubbard Regional Hospital 340 Thompson Road Webster, MA 01570 DPH ID #: 2157 | Jordan Hospital 275 Sandwich Street Plymouth, MA 02360 DPH ID #: 2082 |
| Lahey Clinic Hospital 41 Mall Road Burlington, MA 01805 DPH ID #: 2033 | Lawrence General Hospital One General Street Lawrence, MA 01842-0389 DPH ID #: 2099 |
| Lowell General Hospital 295 Varnum Avenue Lowell, MA 01854 DPH ID #: 2040 | Marlborough Hospital 57 Union Street Marlborough, MA 01752-9981 DPH ID #: 2103 |
| Martha's Vineyard Hospital Linton Lane Oak Bluffs, MA 02557 DPH ID #: 2042 | Mary Lane Hospital 85 South Street Ware, MA 01082 DPH ID #: 2148 |
| Massachusetts Eye & Ear Infirmary 243 Charles Street Boston, MA 02114-3096 DPH ID #: 2167 | Massachusetts General Hospital 55 Fruit Street Boston, MA 02114 DPH ID #: 2168 |

General Documentation
FY1999 Outpatient Hospital Observation Database

Appendix E

Hospital Addresses

| | |
|---|--|
| Medical Center at Symmes 39 Hospital Road Arlington, MA 02174 DPH ID #: 2089 | Mercy Hospital 271 Carew Street Springfield, MA 01102 DPH ID #: 2149 |
| Milford-Whitinsville Regional Hospital 14 Prospect Street Milford, MA 01757 DPH ID #: 2105 | Milton Hospital 92 Highland Street Milton, MA 02186 DPH ID #: 2227 |
| Morton Hospital & Medical Center 88 Washington Street Taunton, MA 02780 DPH ID #: 2022 | Mount Auburn Hospital 330 Mt. Auburn Street Cambridge, MA 02238 DPH ID #: 2071 |
| Nantucket Cottage Hospital 57 Prospect Street Nantucket, MA 02554 DPH ID #: 2044 | New England Baptist Hospital 125 Parker Hill Avenue Boston, MA 02120 DPH ID #: 2059 |
| New England Medical Center 750 Washington Street Boston, MA 02111 DPH ID #: 2299 | Newton-Wellesley Hospital 2014 Washington Street Newton, MA 02162 DPH ID #: 2075 |
| Noble Hospital 115 West Silver Street Westfield, MA 01086 DPH ID #: 2076 | North Adams Regional Hospital Hospital Avenue North Adams, MA 01247 DPH ID #: 2061 |
| Northeast Health Systems – Addison Gilbert Campus 298 Washington Street Gloucester, MA 01930 DPH ID #: 2016 | Northeast Health Systems – Beverly Campus 85 Herrick Street Beverly, MA 01915 DPH ID #: 2007 |
| North Shore Medical Center – Salem 81 Highland Avenue Salem, MA 01970 DPH ID #: 2014 | Providence Hospital 1233 Main Street Holyoke, MA 01040 DPH ID #: 2150 |
| Quincy Hospital 114 Whitwell Street Quincy, MA 02169 DPH ID #: 2151 | Saints Memorial Medical Center One Hospital Drive Lowell, MA 01852 DPH ID #: 2063 |

General Documentation
FY1999 Outpatient Hospital Observation Database

Appendix E

Hospital Addresses

| | |
|--|---|
| Southcoast Health Systems – Charlton Memorial Hospital 363 Highland Avenue Fall River, MA 02720 DPH ID #: 2337 | Southcoast Health Systems – St. Luke's Hospital 101 Page Street New Bedford, MA 02740 DPH ID #L: 2010 |
| Southcoast Health Systems – Tobey Hospital 43 High Street Wareham, MA 02571 DPH ID #: 2106 | South Shore Hospital 55 Fogg Road South Weymouth, MA 02190 DPH ID #: 2107 |
| St. Anne's Hospital 795 Middle Street Fall River, MA 02721 DPH ID #: 2011 | St. Elizabeth's Hospital 736 Cambridge Street Brighton, MA 02135 DPH ID #: 2085 |
| Saint Vincent Hospital 25 Winthrop Street Worcester, MA 01604 | Sturdy Memorial Hospital 211 Park Street Attleboro, MA 02703 |
| UMass. Medical Center 120 Front Street Worcester, MA 01608 DPH ID #: 2841 | UMass. / Memorial Health Care 281 Lincoln Street Worcester, MA 01605 DPH ID #: 2077 |
| Vencor – Boston 1515 Commonwealth Ave. Brighton, MA 02135 DPH ID #: 2091 | Vencor – North Shore (formerly Transitional Hospital Corp.) 15 King Street Peabody, MA 01960 DPH ID #: 2171 |
| Winchester Hospital 41 Highland Avenue Winchester, MA 01890 DPH ID #: 2094 | Wing Memorial Hospital 40 Wright Street Palmer, MA 01069-1187 DPH ID #: 2181 |